## State of Montana Division of Banking and Financial Institutions P.O. Box 200546 Helena, MT 59620-0546 Phone (406)841-2920 Fax (406)841-2930

## **LOAN ORIGINATOR**RELOCATION APPLICATION

Ι,	, am	licensed	in the State of Montana as a loan originator.
My loan originator license num	ber is		in the State of Montana as a loan originator.  My previous employer was, a mortgage broker licensed in the State of
	license #		, a mortgage broker licensed in the State of
Montana. I wish to relocate my	license to:		
Mortgage Broker License #			
Mortgage Broker Designated N	Ianager Signat	ure	
Mortgage Broker Company Na	me (Print)		
Street Address			
City S	tate	Zip	
Phone			
Loan Originator Signature			
Loan Originator Name (Print)			
Street Address			
City	State		Zip

Please include a relocation application fee of \$50 payable to the State of Montana. Your application will not be processed without the fee.